2000) ONIFORM BO2	INESS KEPUI	KI (OBH	<u>(1) </u>		~	02404	
DOCU 1. Entity Nam		0000282		250	FILED RETARY OF STATE ON OF CORPORATION		9 =	
PRIME AIR PARTS, L.L.C.			40.8	DIVISI	ON OF CORPORATION	45	`	
					JUL -3 PM 1:29	3 ~~)	X .	
Principal Place of Business Mailing Address 6601 LYONS ROAD. SUITE H-6 6601 LYONS ROAD. SUITE H-6				فيهين (ن) ويتية الاستفاد ويب المناف ا			<u> </u>	
COCONUT CR	EEK FL 33073	COCONUT CREEK FL 33073	3632	1102111	iki dia 1868 kaji Bahil Bahil Bakil) (************************************	+0.110 (J.04 J.00)	
• D:::::::	No. of Decision	` 3. Mailing Address						
2. Principal Place of Business				DO NIOT WRITE IN THIS SPACE				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE 4. FFI Number Applied For				
City & State		City & State		4. FEI Numb	0889735	, No	t Applicable	
Zip	Country	Zip	Country	5. Certificate	5. Certificate of Status Desired \$5.00 Additional Fee Required			
	6. Name and Address of Current	Registered Agent	Name	7. Name and	Address of New Register	red Agent		
NAPLES-LAWDOCK, INC. C/O QUARLES & BRADY				t Address (P.O. Box Number is Not Acceptable)				
	iiami trail north, suite 300			 				
NAPLES FL 34103-3060				FL Zip Code				
8. The above	e named entity submits this statement for	or the purpose of changing its re	egistered office or	registered agent, or bo	th, in the State of Florida.	•		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signatu	re required when reinstating)	·	ATE		
			W!!! FEE 19 \$!		<u></u>	<u> </u>		
- , -		Make Check Paya		1				
9.	MANAGING MEME		10.		ADDITIONS/CHAN			
TITLE MAME STREET ADDRESS CITY- 81-ZIP	MGRM COHEN, BARRY 6601 LYONS ROAD, SUITE H-6 COCONUT CREEK FL 33073	(Delecto	TITLE NAME STREET ADDRESS CITY-ST-ZIP		1	Change	uottippy	
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NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
indicated	certify that the information supplied wit don this report is true and accurate and ability company or the receiver or truste	d that my signature shall have th	e same legal effec	t as if made under oath	n; that I am a managing me	r certify that the ir ember or manage	nformation or of the	
SIGNAT	URE: SIGN	CHARLES THE QUIT	RED		Date	Daytime Phone #	·	
	SIGNATURE SON TITLE OF PH	THE PARTY OF SIGNING MANAGING MI				Dayano i None #		